



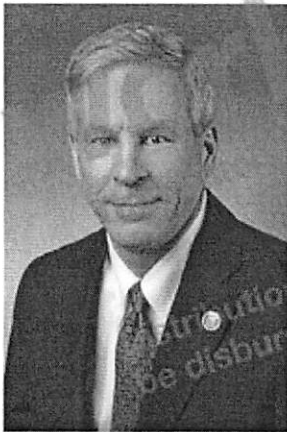
[Back to News](#) | [Print News](#)

State: Mo.

PDMP Bill Clears House; Schaaf Prepared to Fight if Compromise Not Reached: Top [2015-02-27]

A bill to bring a prescription drug-monitoring program to Missouri has cleared the state House of Representatives, and now must face a long-standing opponent of PDMP bills in the Legislature's upper chamber.

House Bill 130, introduced by Rep. Holly Rehder, passed the House on Thursday by a 107-48 vote. Missouri remains the final state that hasn't enacted a prescription drug-monitoring program, a fact that's generated increased media attention at both the local and national levels.



Sen. Rob Schaaf

Whether HB 130 will mark the end of that attention is uncertain, largely because Sen. Rob Schaaf – the most vocal opponent of other lawmakers' PDMP measures – says he's ready to fight against the legislation again if need be.

Rehder didn't return telephone calls Thursday. A representative for a pharmaceutical manufacturer says the industry wants Rehder's PDMP bill to pass.

“There's been a lot of time spent talking to all the senators, and particularly talking to leadership, about making sure the bill gets to them on the floor,” said Randy Scherr, a government relations consultant who represents Mallinckrodt Pharmaceuticals. “And I think the hope is that we can try to alleviate ... most of the concerns of those people who have the questions. I don't know if we're going to be able to alleviate all of Sen. Schaaf's issues, but we're going to continue to try to work on that and see what can be worked out.”

HB 130 would require dispensers to submit information on Schedule II through IV prescriptions to a database maintained by the state's Department of Health and Senior Services, including the

prescription number, the medication's National Drug Code, patient identifying information, the number of days' supply of the drug and the quantity dispensed.

Dispensers who are not able to submit the prescription data electronically would be able to obtain a waiver to submit the information on paper or by other means. HB 130 holds that the dispensation of information will be confidential, with anyone who illegally discloses information from the database guilty of a class A misdemeanor.

The Senate already has two other PDMP measures sitting in committee. Sen. David Sater, who proposed a PDMP bill last year, has filed an essentially identical measure to HB 130, Senate Bill 63. And Schaaf has offered a measure of his own for the second straight year.

Schaaf has repeatedly been an instrumental force in blocking other lawmakers' PDMP legislation for several years running. He famously led an hours-long filibuster in 2012 that was credited with helping to kill SB 710, a PDMP measure introduced by Sen. Kevin Engler, who is no longer in office.

Citing concerns that patients' personal information would be at risk, Schaaf has introduced Senate Bill 111, with provisions identical to the bill he filed in 2014. SB 111 would stipulate the creation of a PDMP by the Department of Health and Senior Services, but with the data submitted staying exclusively with that department's Bureau of Narcotics and Dangerous Drugs. The bureau would flag all cases of potential prescription misuse using an internal algorithm in its own computer system. Dispensers of Schedule II through IV prescriptions would be able to transmit information to the database, but wouldn't be able to access the information inside it.

Schaaf said in an interview Thursday that he's prepared to try to block Rehder's PDMP bill if the other side isn't willing to compromise, such as by putting Rehder's measure to a public vote.

"If they really care about stopping drug diversion and getting doctor-shoppers off the street, they should be willing to compromise," he said. "Because Senate Bill 111 is a more effective way of doing that."

Recalling the 2012 filibuster, Schaaf said he had made it clear then that he was willing to "sit down" if the proponents of Engler's SB 710 would agree to put the measure to a public referendum.

"And after about seven hours, the other side agreed to language that would put it to a vote of the people, and it actually was voice-voted in the Senate to pass, going to a vote of the people," he said. "But the other side wouldn't allow it to be third-read, because they said that it would never pass. And I don't believe that we should restrict people's freedom like that, knowing that the people would not want it."

Michael Gavin, president of the medical cost-containment firm Prium, said Thursday that the contentiousness of the PDMP legislative battle in Missouri has made it unique.

"The overwhelming view of most state legislatures is despite the fact that there are privacy concerns – and we have seen those voiced in places like Tennessee and New York – the overwhelming view amongst the legislatures is that the public health necessity of the database far outweighs the privacy concerns," Gavin said.

To Gavin, Rehder's HB 130 is a mixed bag. He likes that it would require dispensers to submit data to the database, and that it includes liability protection for physicians who don't use the database. He

said that “protects the physician community in the event that the doctor’s either too busy, or can’t gain access to the system.” And Gavin said Rehder’s bill is the first PDMP measure he’s seen that would require the development of education courses for stakeholders who use the database.

However, Gavin has some issues with the bill. For one, it wouldn’t require physicians to check the database before writing a prescription, a requirement that’s only in place in four states. Gavin also doesn’t like the fact that the database would be built without taxpayer support. HB 130 holds that funding for the database will come entirely from gifts, grants and donations.

“I’m sure there’s some expectation that the payer community will step up, or that other nonprofits with the goal of combating prescription drug abuse will step up,” he said. “But honestly, this is what taxes are fundamentally intended to do. This is a database that will serve a common good; it has a fundamental community purpose and isn’t terribly expensive.”

As for Schaaf’s measure, Gavin believes that SB 111’s proposal to keep the data within the BNDD’s computer system is impractical because of the volume of flags of potential abuse that one division would have to deal with.

“And on the other hand, I find it ironic that Sen. Schaaf is a physician by training, and yet he shows a total lack of trust in the physician community to access and deal with this data in the context of individual patient care, which is where it ought to be,” Gavin said.

For Schaaf, it all ultimately comes down to the issue of putting a PDMP to a public vote, saying that if Rehder “could make her case to the people of Missouri, that’s good with me. I just don’t believe she could do it. And I think the supporters of the House bill know that, because they won’t agree to let it go to a vote of the people.”

HB 130 can be viewed [here](#).

SB 63 can be viewed [here](#).

SB 111 can be viewed [here](#).